2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P00000102302 MODERN BOOF DESIGNS, INC. 04-30-2001 90372 030 ***150.00 Principal Place of Business Mailing Address 263 COMMERCIAL BLVD., #2 263 COMMERCIAL BLVD., #2 LAUDERDALE BY THE SEA FL 33308 LAUDERDALE BY THE SEA FL 33308 2. Principal Place of Business 3. Mailing Address <u> 58ss</u> Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VOJVODICH, EDWARD M Street Address (P.O. Box Number is Not Acceptable) 263 COMMERCIAL BLVD., #2 LAUDERDALE BY THE SEA FL 33308 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. NOTE: Registered Agent signature required whos repostation DATS FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE Delete TITLE ☐ Change Addition | VOJVODICH, EDWARD M NAME NAME 263 COMMERCIAL BLVD., #2 STREET ADDRESS STREET ADDRESS LAUDERDALE BY THE SEA FL 33308 CITY-ST-7:P CITY-ST-ZIP TITLE ☐ Delete TITLS Change Addition VAINSTEIN, REGINA NAME NAME 263 COMMERCIAL BLVD., #2 STREET ADDRESS STREET ADDRESS LAUDERDALE BY THE SEA FL 33308 C:TY-ST-ZIP CITY-ST-71P ☐ Delete TITLE Change Addit on NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHTY-SI-ZIP CITY-ST-ZI? TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. ATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

FILED